## **CITY OF SHOREVIEW**

## **SIGN PERMIT APPLICATION**

## SECTION 1. GENERAL INFORMATION

1. Address of Property:					
2. Property Owner/Tenant:					
Phone Number:					
3. Sign Installer:					
Address:	Phone Number:				
City License?		no			
4. Sign Designer:	Phone Number				
SECTION 2. SIGN INFORMAT	TON (CHECK AS AP	PROPRIATE)			
PROPOSED SIGN	TYPE OF SIGN	STYLE OF SIGN			
THOI OBED BLOT.	11111010101	<u> </u>	1011		
New Sign	TEMPORARY:	TEMPORARY:			
Temporary	Dates	Banner			
Relocate		Readerboard			
Repair		Other			
Remove					
	PERMANENT:	PERMANEN			
	Wall	Canister/Cabi			
	Freestanding	Individual Le	tter		
	Incidental	Monument			
	Other	Ground			
		Pylon			
SECTION 3. CURRENT SIGN F	<del>-</del>				
Is this property subject to Comprehensive Sign Plan? yes no		•	-		
If yes, does this proposal comply? yes no					
If yes, attach support d					
If no, explain the changes and why requested. (attach separate sheet)					
	HEIGHT GRAP	PHICS AREA (SQ. FT.)	SIGN FACE <u>AREA (SQ. FT.)</u>		
Freestanding Sign Maximums:					
Wall Sign Maximums:					
Other (Please List):					
1/\/1 / 111 = = = 1 4\/4					

FREESTANDING:	<u>HEIGHT</u>	<u>WIDTH</u>	<u>AREA</u>		
Sign Face	ftin.	ftin.	sq. ft.		
Graphic/Copy Area	ftin.	ftin.	sq. ft.		
Sign Base (monument/gr	round)ftin.	ftin.	sq. ft.		
Readerboard	ftin.	ftin.	sq. ft.		
Is any incidental business signage proposed? yes no If yes, where is it to be located?					
If yes, provide dimen		ftin.	sq. ft.		
Height above ground (to		ftin.			
Distance from property 1		ftin.			
D: 4	side	ftin.			
Distance to nearest free		ftin.			
Lighting type					
Construction material					
Copy message Is the sign location outside of all easements?					
is the sign location outsi	uc of all cascifichts!	yes no			
WALL:	HEIGHT	WIDTH	AREA		
Sign Face:	ftin.	ftin.	sq. ft.		
Graphic Area:	ftin.	ftin.	sq. ft.		
Sign Band:	ftin.	ftin.	sq. ft.		
Distance form edge of ba	ay/building:				
Copy message:	-				
Lighting type:					
Is their any incidental business signage proposed? yes no			_		
If yes, where to be					
located?					
Heightft	_in. / Lengthft	in. / Areasq. ft.			
SECTION 5. SUBMISSION REQUIREMENTS AND ACKNOWLEDGMENTS					
1. Scaled Site Plan/Building Elevation Plan					
2. Scaled Sign Design					
3. Other information as requested by the City					
The undersigned partifies that the above statements are true to the best of their Irraviledes on belief					
The undersigned certifies that the above statements are true to the best of their knowledge an belief.					
Applicant's Signature Date					
OFFICE USE ONLY					
	Approved By: Date:				
Fee: \$					